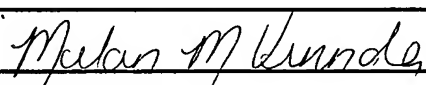
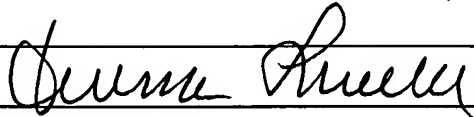
 <p>(Use for all correspondence after initial filing)</p>	Application Number	10/797,146
	Filing Date	March 11, 2004
	First Named Inventor	Dinan, Timothy
	Art Unit	1614
	Examiner Name	Kantamneni, Shobha
	Attorney Docket Number	025911-000600US
Total Number of Pages in This Submission		165

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Milan M. Vinnola		
Date	October 26, 2005	Reg. No.	45,979

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Aurora Lowell	Date	October 26, 2005

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PATENT
Attorney Docket No.: 025911-000600US
Client Reference No.: NC 004

On October 26, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Timothy Dinan, et al.

Application No.: 10/797,146

Filed: March 11, 2004

For: COMPOSITIONS AND METHODS
FOR THE TREATMENT OF
DEPRESSION AND OTHER
AFFECTIVE DISORDERS

Examiner: Kantamneni, Shobha

Art Unit: 1614

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO-1449 are being called to the attention of the Examiner. Copies of the references [in compliance with the requirements of 1287 OG 163] are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed are copies of the Search and Examination reports issued in the corresponding PCT application.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

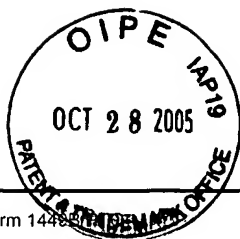
Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Milan M. Vinnola
Reg. No. 45,979

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MMV:arl
60617702 v1



PTO/SB/08B (08-03)

INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Complete if Known		
			Application Number	10/797,146	
			Filing Date	March 11, 2004	
			First Named Inventor	Dinan, Timothy	
			Art Unit	1614	
			Examiner Name	Kantamneni, Shobha	
Sheet	1	of	1	Attorney Docket Number	025911-000600US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	AA	US-4,260,600	04/07/1981	Valle	
	AB	US-			
	AC	US-			
	AD	US-			
	AE	US-			
	AF	US-			

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	AG	WO	02/102297	A2	12/27/2002	Müller		<input type="checkbox"/>
	AH	WO	03/049687	A2	06/19/2003	Ehrenpreis		<input type="checkbox"/>
	AI	WO	2004/032718	A2	04/22/2004	Tobinick		<input type="checkbox"/>
	AJ							<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	AK	Young-Xu <i>et al.</i> , "Long term statin use and psychological well being", <i>J. Am. Cardiol.</i> , 42:690697 (August 2003)	
	AL	van Wes, <i>et al.</i> , "Activation of the inflammatory response system: A new look at the etiopathogenesis of major depression," <i>Neuroendocrinology Letters</i> , 20: 11-17 (January 11, 1999)	

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.